COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION

As below named inventors, we each hereby declare that: My residence, post office address and citizenship are as stated below next to my name;

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PIEZOELECTRIC SENSOR ARRANGEMENT

amended or	hereto. s United States Patent A n (if applicable).	pplication Number	
was filed a December 2003.	s PCT International App	incation Number PC1/S	E2003/002001 on 18
I hereby state that I have specification, including t			
I acknowledge the duty t patentability as defined i			
I hereby claim foreign processing to the states of America listed patent or inventor's certileast one country other than the states of the states of the states of the states of the states one country other than the states of t	n application(s) for pater ication(s) designating at below and have also ide ficate or any PCT internant he United States of the before that of the app	nt or inventor's certifical least one country other ntified below any foreignational (PCT) application America filed by me on lication(s) of which prior	the or of any than the United an application(s) for on(s) designating at the same subject ority is claimed:
PRIOR FOREIGN/PCT APPLIC	ATION(S) AND ANY PRIORITY	CLAIMS UNDER 35 U.S.C. §§1	19(a)-(d), 172 or 365:
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. §§119, 172 or 365
PCT	SE2003/002001	18,12,2003	⊠Yes □No
Sweden	0203772-9	19,12,2002	Yes No

I hereby appoint the following attorneys and agent(s) represented by Customer Number 26288 to prosecute said application and to transact all business in the U.S. Patent and Trademark Office connected therewith: Reginald Finn, Reg. No. 39,975; Timothy Platt, Reg. No. 43,003; and Olivia Tolan, Reg. No. 45,161,

c/o ALBIHNS STOCKHOLM AB Linnégatan 2 BOX 5581 SE-114 85 Stockholm SWEDEN

Address all telephone calls to Albihns Stockholm AB at +46(0)8 5988 7200.

I hereby declare that all statements are made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	Teodor AASTRUP
Signature	and Santry
Date	050516
Residence (City, State, Country)	Stockholm, Sweden
Citizenship	Swedish
Mailing Address	Grubbensringen 33, SE-112 69 Stockholm
City, State, ZIP, Country	SE-112 69 Stockholm, Sweden

FULL NAME OF SECOND INVENTOR, IF ANY	Jan SMITH
Signature	Ju puits
Date	050517
Residence (City, State, Country)	Stockholm, Sweden
Citizenship	Swedish
Mailing Address	Ringvägen 88, SE-118 60 Stockholm
City, State, ZIP, Country	SE-118 60 Stockholm, Sweden

FULL NAME OF THIRD INVENTOR, IF ANY	Henrik ANDERSON
Signature	led pol
Date	0505/6
Residence (City, State, Country)	Sundbyberg, Sweden
Citizenship	Swedish
Mailing Address	Fiskargränd 65, SE-175 55 Järfälla
City, State, ZIP, Country	SE-175 55 Järfälla, Sweden